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Bib Data Sheet

CONFIRMATION NO. 1290

SERIAL NUMBER 10/729,474	FILING DATE 12/05/2003 RULE	CLASS 257	GROUP ART UNIT 2826	ATTORNEY DOCKET NO. 887A.0004.U1(US)
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APPLICANTS

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** CONTINUING DATA *****

None. EP

** FOREIGN APPLICATIONS *****

FINLAND 20025059 12/05/2002

No copy.

EP 11-25-05

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/08/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged	FINLAND	8	9	2

ADDRESS

29683
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TITLE

System and device for monitoring of occupancy area

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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